## 2005 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE: 4

## **Secretary of State** 01-10-2005 90025 044 \*\*\*\*70.00 **DOCUMENT # 706460** FIRST BAPTIST CHURCH OF CUTLER RIDGE, INC. COLOURS NO CONTRACTOR OF THE CONTRACTOR "" r. . . 47.2" Principal Place of Business Mailing Address **CUTLER RIDGE INC** CUTLER RIDGE INC 10301 CARIBBEAN BOULEVARD 10301 CARIBBEAN BOULEVARD MIAMI, FL 33189 MIAMI, FL 33189 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01072005 Chg-NP CR2E037 (10/03) City & State Applied For City & State FEI Number 59-0979922 1.5 Not Applicable Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired \_\_\_\_ 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name TATEM, MICHAEL A REV Street Address (P.O. Box Number is Not Acceptable) 9881 SW 190 STREET MIAMI, FL 33157 Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE agent and title if applicable 9. Election Campaign Financing \$5.00 May Be Make check payable to Filing Fee Is \$61.25 Trust Fund Contribution: Florida Department of State Due by May 1, 2005 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. TD TITLE ☐ Delete ☐ Addition POOLE, LANE NAME NAME 660 SE 23 LN STREET ADDRESS STREET ADDRESS HOMESTEAD, FL 33033 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE ☐ Delete ☐ Change TITLÉ CHANDLER, DANNY NAME STREET ADDRESS 10601 SW 199 ST STREET ADDRESS MIAMI, FL 33157 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change Addition WILLIAMS, WALLACE NAME NAME Hamilton, Gary STREET ADDRESS 128 NW 15 ST STREET ADDRESS 15885 SW. 272 Street HOMESTEAD, FL 33030 CITY-ST-ZIP CITY-ST-ZIP tomestead Addition TITLE ☐ Delete JUDSON, RAY NAME NAME 9940 NICARAGUA DR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI, FL 33189 ☐ Change ☐ Addition ☐ Delete TITLE TITLE BARROWS, PATTI NAME 18550 SW 93 AVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP\* MIAMI, FL 33157 CITY-ST-ZIP " ☐ Delete ☐ Change Addition TITLE TITLE £0 . 11 € . 11 NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if

Bar<u>rows</u>

FILED Jan 10, 2005 8:00 am